

Request for Information

Under a legislative authority or the Information Privacy Act 2009

Privacy statement: The Department of Transport and Main Roads (TMR) will not disclose personal information unless required or authorised by law or where an exception in Information Privacy Principle (IPP) 11 (1) of the Information Privacy Act 2009 (QLD) applies. The information you are requesting may be disclosed if TMR is satisfied on reasonable grounds that it is relevant and necessary for one or more of the provisions listed in IPP 11 (1) (e) (i) to (v). Each request will be assessed on a case by case basis. The information collected on this form will be used to process your request and as a record of the disclosure as required under Schedule 3, 11(2). Any information provided to you must only be used for the purpose it was requested and not for any other purpose.

Section 1 - Inform	nation Request			
Video Surveillance S	Systems email: VSSRequest@tmr.qld.gov.au			ificate required for this request
Go Card	email: informationrequests@translink.com.au	(QI	P only)	
Other				
Location of incident	(including street and suburb)		Date	24 hr Time (HH:MM)
Request details				
Section 2 - Legis	•			
	authority and Act that authorises the release of the requ			
Alternatively, see Se	ection 3 for requests made under IPP 11 of the Informati	on Privacy Act.		
Section 3 - Reque	est made under IPP 11 of the Information Priva	cy Act		
criminal offence or b				
penalties or sar				
	nt of laws relating to confiscation of proceeds of crime (p of the public revenue	lease indicate l	below which la	aw)
	detection, investigation or remedying of seriously impro	per conduct		
	for, or conduct of, proceedings before any court or tribu		entation of the	orders of a
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Request for Information continued... Page 2 of 2 Section 4 - Requesting Officer's Details (Requesting Officer and Senior Officer must be two separate officers) QPS Reference (if applicable) Department/Agency Name Position Email Phone number Date Requesting officer's signature Section 5 - Senior Officer's Authorisation Department/Agency Name Position **Email** Phone number I am satisfied this information is reasonably necessary pursuant to the legislation cited in Sections 2 or 3 and that the information provided will only be used for the purpose stated in this request. Senior officer's signature/name (Shift supervisor/Sergeant) Date Section 6 - TMR Use Only Date request received Internal reference number Authorising officer's name and signature A member of the QPS may apply for a release of licence/authority/card holder information if they are performing a function/s associated with the role of police officer. Note: It is a requirement that a copy of this completed form is placed on file as a record of this disclosure under this provision of personal information. List actions taken with downloaded image/file e.g. storage/transfer of image/file(s): Section 7 - Information Release QPS Officer/Applicant to complete upon receipt of footage/information Name Position Signature Date